



Chad Cameron

Fire Chief
645 E. Cope Industrial Way
Phone: 907-745-3709
Direct: 907-745-3854
Fax: 907-745-5443



MEMORANDUM

TO: Palmer Fire & Rescue Applicant

FROM: Chad Cameron

SUBJECT: Required Paperwork

Attached is the paperwork required to apply to join Palmer Fire & Rescue. Please fill it out as completely as possible and return to our offices 8:00 a.m. to 5:00 p.m. Monday through Friday. Interviews are scheduled at the end of each quarter throughout the year.

Please read the Applicant's Sworn Statement but do not sign the form until you can do so in front of a notary public. My administrative assistant is a notary public and can take care of this paperwork.

The following is also required:

- 1. Must have high school diploma or GED. Turn in copy with application.**
2. Alaska Driving Record - The fee for a driving record is currently \$10 and can be obtained at online.dmv.alaska.gov/onlinedrivingrecords.
3. Criminal Background Check - Can be picked up at the Alaska State Troopers office on Wednesdays or Fridays from 8:00 a.m. to 4:00 p.m. (One piece of photo I.D. is required to obtain this background check.) The cost is \$20.
4. Copies of any applicable certificates.
 - Firefighter certificate.
 - Rescue Technician certificate.
 - BLS provider card.
 - Hazardous Materials First Responder Awareness.
5. All applicants selected for hire are required to complete a pre-employment drug screening.



PALMER FIRE & RESCUE
645 E. COPE INDUSTRIAL WAY
PALMER, AK 99645-6748
PHONE: 907-745-3709 FAX: 907-745-5443



APPLICATION FOR ON-CALL RESPONDERS

Personal Information

Name (Last, First MI): _____

Physical Address: _____

Mailing Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email: _____

Date of Birth: _____ SSN: _____ ADL: _____

Employer: _____ Position: _____

Service Information

Please check the position for which you are applying: Auxiliary Firefighter Rescue

Current Certifications (not required to join; however, copies of any applicable certificates should be attached):

Have you ever had an association with another fire department or rescue service? Yes _____ No _____

If so, when and where? _____

Education

Circle the highest level of education you have completed.

High School: GED H.S. Diploma College or Business School: 1 yr. 2 yrs. 3 yrs. 4 yrs. or more

NAME AND LOCATION OF SCHOOL	TYPE OF DIPLOMA/DEGREE	MAJOR OR COURSE TITLE

Medical Evaluation

Are you able to perform the necessary functions of this job* with or without reasonable accommodations?

Yes _____ No _____

* See the Job Descriptions available on the website at <https://palmerak.org/fire-rescue/page/applications>

Criminal History

Have you ever been convicted of a felony? Yes_____ No_____ Year of conviction_____

Have you been convicted of a misdemeanor within the past five years? Yes_____ No_____

Have you ever had your driver's license suspended or revoked as a result of a moving violation(s). Yes_____ No_____

If yes to any of the above questions, you must attach an explanation, even if you received a suspended imposition of sentence.

A conviction is not automatic grounds for disqualification. The number and nature of and time elapsed since convictions and the relationship to the job applied for will be evaluated in reviewing the application.

References (At least one reference should be a current or former supervisor.)

Please List NAME, ADDRESS and CONTACT TELEPHONE NUMBERS for three references.

1.

2.

3.

- The information provided in this employment application is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in dismissal. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This authorization includes permission to check employment references.
- If necessary for employment you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or drug test, or to sign a conflict of interest agreement and abide by its terms.
- I understand that acceptance of an offer of employment does not create a contractual obligation or permanent employment upon the City of Palmer. Employment may be terminated at any time at the option of the employee or City of Palmer.

I understand and agree to the information shown above.

Applicant Signature:

Date:

APPROVED BY:

Date:

Signature of Service Chief

The City of Palmer is an equal employment opportunity employer.

Applicants will receive consideration without regard to race, color, religion, creed, gender, national origin, age, disability, or marital or veteran status.

Revised 02/25/2022



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APPLICANT'S SWORN STATEMENT

Authorization and Release

1. I hereby affirm that all the information I provided or provide to the City of Palmer relating to my application for employment, whether by written application form, resumé, oral statement or otherwise, is true and complete to the best of my knowledge. In addition, I agree that any intentional misrepresentation or omission and any materially negligent or innocent misrepresentation or omission in or from said information may disqualify me from further consideration for employment and may be considered justification for immediate discharge from employment if discovered at a later date.
2. I authorize a thorough investigation of my past employment and activities and agree to cooperate in such investigation. Further, I release from all liability or responsibility all persons and entities requesting or supplying such information. Also, I authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the job for which I am being considered or any future job with the City of Palmer in the event I am hired.
3. I understand that any and all information obtained by the City of Palmer about me from any source is confidential and will not be released to me unless required by law. Accordingly, I waive any right I may have to know test results, interpretations made, and access to the original data from which final recommendations have been made.
4. I hereby agree to submit to any lawful drug or integrity testing that may be required as a condition of employment or continued employment and understand that refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including discharge.
5. I understand this application is not and is not intended to be a contract for employment or continued employment.

6. I understand that according to federal law all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and U.S. citizen status or, if aliens, their legal authorization to work in the U.S. As a consequence, I understand that any offer of employment would be contingent on my ability to produce the required documentation within the time period required by law.

Signature of Applicant

Date

STATE OF ALASKA)
) ss:
THIRD JUDICIAL DISTRICT)

Subscribed and sworn to me before me this _____ day of _____,
20_____, by _____, applicant.

Notary Public in and for Alaska

My Commission Expires:_____